"condition" for grammatical clarity. The amendment finds basis in claim 1 and at page 6, lines 13-27. No new matter has been added.

The specification is amended to correct typographical and spelling errors and to produce grammatical clarity. The amendment to the paragraph on page 53, lines 4-21, of the specification deletes the inadvertently added verb phrase "are used" and adds the inadvertently omitted verb phrase "can be the TNF receptor antagonist" for grammatical clarity. The amendment finds basis at page 53, lines 4-5 of the specification. No new matter has been added. The amendment to the paragraph on page 58, lines 18-27, of the specification deletes the inadvertently added verb phrase "are used" for grammatical clarity.

Included as an attachment is a marked-up version of the specification paragraphs that are being amended, per 37 CFR §1.121.

* * *

Entry of this amendment and examination of the application are respectfully requested.

Respectfully submitted,

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:

FREDEKING et al.

Serial No.:

10/038,557

Filed:

January 3, 2002

Confirmation No.: 8399

For:

COMPOSITIONS AND METHODS

FOR TREATING HEMORRHAGIC VIRUS INFECTIONS AND OTHER

DISORDERS

Art Unit:

1646

Examiner:

Unassigned

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ATTACHMENT TO THE PRELIMINARY AMENDMENT MARKED UP PARAGRAPHS AND CLAIMS (37 CFR §1.121)

IN THE SPECIFICATION:

Please amend the specification as follows:

Please amend the paragraph beginning on page 3, line 26, through page 4, line 8, as follows:

Cells [know]known to produce IL-1ra include monocytes, neutrophils, macrophages and fibroblasts. Cytokines known to upregulate IL-1Ra production include IL-13, IL-6, IL-4, IFN-y, GM-CSF and TGF-β, the latter apparently by triggering IL-1 production which itself triggers IL-1Ra synthesis. The amino acid sequences of IL-1Ra from at least four species have been determined (human, rat, mouse and rabbit) and found to be at least 75% homologous (Cominelli et al. (1994) J. Biol. Chem. [269:6963,)]269:6963). IL-1Ra can also be synthesized as a strictly intracellular form whose production is the result of an alternative splicing of exon 1 (Butcher et al. (1994) J. Immunol. 153:701; Arend et al. (1993) Adv. Immunol. 54:167). IL-1Ra is released in vivo during experimentally-induced inflammation and as part of the natural course of many diseases. Administered experimentally, IL-1Ra has been demonstrated to block IL-1 activity in vitro and in vivo.

Pleas amend the paragraph beginning on page 17, line 5, through pag 18, line 8, as follows:

Tetracycline, which is well known to those of skill in the art, has the structure:

It is intended herein for the [the] term "tetracycline" to encompass all pharmaceutically active species of tetracycline compounds, solutions thereof and mixtures thereof, prodrugs thereof and any drug recognized as a tetracycline. Tetracycline includes forms, such as hydrated forms, and compositions such as aqueous solutions, hydrolyzed products or ionized products of these compounds; and these compounds may contain different numbers of attached water molecules. Thus, as used herein, the term tetracycline compound encompasses all derivatives and analogs and modified forms thereof, including but not limited to, those set forth herein. Tetracycline and tetracycline-like compounds include, but are not limited to aspirin, aureomycin, apicycline, chlortetracycline, clomocycline, demeclocyline, guamecycline, lymecycline, meclocycline, methacycline, minocycline, oxytetracycline, penimepicycline, pipacycline, rolitetracycline, sancycline, and senociclin, as well as any others falling within the above formula. Also included among tetracycline-like compounds are compounds that alter bacterial folic acid

metabolism, such as sulfa drugs, including sulfonamides, and thalidomide. Such compounds can be identified by their ability to alter bacterial folic acid metabolism.

Please amend the paragraph on page 20, lines 13-24, as follows:

Thus, reference, for example, to "IL-1" encompasses all proteins encoded by the IL-1 gene family including IL-1 α , IL-1 β , IL-1Ra and icIL-1Ra, or an equivalent molecule obtained from any other source or that has been prepared synthetically. It is intended to encompass IL-1 with conservative amino acid substitutions that do not substantially alter its activity. Suitable conservative substitutions of amino acids are known to those of skill in this art and may be made generally without altering the biological activity of the resulting molecule. Those of skill in this art recognize that, in general, single amino acid substitutions in non-essential regions of a polypeptide do not substantially alter biological activity (see, e.g., Watson et al. Molecular Biology of the Gene, 4th Edition, 1987, The [Bejacmin/Cummings]Benjamin/Cummings Pub. co., p.224).

Please amend the paragraph beginning on page 32, line 8, through page 33, line 2, as follows:

For clarity of disclosure, and not by way of limitation, the detailed description is divided into the subsections that follow. The description below is exemplified by reference to viral hemorrhagic diseases. It is understood that the methods, compositions, combinations and kits provided and described herein may be used for treatment of any disorder, disease or condition characterized by a deleterious immune response, particularly, but not limited to, those [specificed]specified herein. Such diseases, conditions and disorders include, but are not limited to: viral infections, such as viral hemorrhagic infections, lentivirus infections, HIV infections, herpes virus infections; bacterial infections, particularly infection with pathogenic strains of *E. coli* and *Streptococcus*; viruses associated with sleep disorders, such as HIV; parasitic infections, such as malaria; autoimmune diseases, such as thyroid diseases, rheumatoid arthritis, and [lupis]lupus; sepsis; cachexia, such as the wasting associated with HIV

infection and cancer; rheumatoid arthritis; chronic myelogenous leukemia and transplanted bone marrow-induced graft-versus-host disease; septic shock; immune complex-induced colitis; cerebrospinal fluid inflammation; endotoxemia; autoimmune disorders; multiple sclerosis; cell death associated with apoptosis; thyroid diseases and other endocrine disorders in which TNF or IL-1 is implicated or is a mediator; gynecological disorders, including endometriosis and infections associated therewith; and other diseases mediated by or associated with IL-1 and/or TNF. It is also understood that IL-1 and TNF expression serve as markers for these disorders to monitor the treatments herein and the blood compositions herein, but that these inflammatory response compounds are not necessarily the only agents involved.

Please amend the paragraph on page 36, lines 1-7, as follows:

For purposes herein a tetracycline is any compound recognized by those of skill in the art to have the anti-inflammatory activities of a tetracycline and includes, all derivatives, including salts, esters and acids, analogs, prodrugs, modified forms thereof, and other compounds related to tetracycline as [desribed]described above. The following are exemplary tetracycline compounds intended for use in the methods and compositions and combinations provided herein.

Please amend the paragraph beginning on page 41, line 27, through page 42, line 13, as follows:

(8) Other Chemically-Modified Tetracyclines

Other tetracyclines include, but are not limited to, dedimethylaminotetracyclines, which include 4-dedimethylaminotetracycline, 4-dedimethylamino-5-oxytetracycline, 4-dedimethylamino-7-chlortetracycline, 4-hydroxy-4-dedimethylaminotetracycline, 5a, [6-anhydro-4hydroxy-4-dedimethylaminotetracycline]6-anhydro-4-hydroxy-4-dedimethylaminotetracycline, 6a-deoxy-5-hydroxy-4-dedimethylaminotetracycline, 6-demethyl-6-deoxy-4-dedimethylaminotetracycline, 4-dedimethylamino-12a-deoxytetracycline, 4-dedimethylamino-11-hydroxy-12a-deoxytetracycline, 12a-deoxy-4-deoxy-4-dedimethylaminotetracycline, 6a-deoxy-5-deoxy-5-deoxy-4-deoxy-4-dedimethylaminotetracycline, 6a-deoxy-5-

hydroxy-4-dedimethylaminodoxycycline, 12a,4a-anhydro-4-dedimethyl-aminotetracycline and minocycline-CMT *i.e.*, 7-dimethylamino-6-demethyl-6-deoxy-4-dedimethylaminotetracycline. Further examples of chemically-modified tetracyclines contemplated for use herein, include but are not limited to, 6a-benzylthiomethylenetetracycline, the 2-nitrilo analogs of tetracycline (tetracyclinonitrile), the mono-N-alkylated amide of tetracycline, 6-fluoro-6-demethyltetracycline, 11a-chlortetracycline, tetracycline pyrazole and 12a-deoxytetracycline and its derivatives (see, *e.g.*, U.S. Patent No. 5,532,227).

Please amend the paragraph on page 49, lines 5-12, as follows:

Monoclonal antibodies, particularly humanized antibodies can be used. Anti-IL-1 antibodies are known (see, e.g., U.S. Patent Nos. 4,772,685 and 4,994,553). Anti-IL-1 receptor antibodies are also known (see, e.g., Chen et al., Cancer Res., 58(16): 3668-76 (1998); Clark et al., J. Interferon Cytokine Res., 16(12): 1079-88 (1996); Zerek-Melen et al., Eur. J. Endocrinol., 131(5): 531-4 (1994); [McIntyreet al.]McIntyre et al. (1991) J. Exp. Med., 173(4):931-9; Benjamin et al. (1990) Prog. Clin. Biol. Res., 349:355-6).

Please amend the paragraph on page 53, lines 4-21, as follows:

The TNF receptor antagonist can be a TNF receptor death domain ligand protein, a tumor necrosis factor binding protein (TNF-BP), a TNF receptor-IgG heavy chain chimeric protein (Peppel et al., *J. Exp. Med.*, 174(6):1483-9 (1991)), a bacterial lipopolysaccharide binding peptide derived from CAP37 protein (U.S. Patent No. 5,877,151) and a Myxoma virus T2 protein (Schreiber et al., *J. Biol. Chem.*, 271(23):13333-41 (1996)). Exemplary TNF receptor death domain ligand proteins include those described in U.S. Patent Nos. 5,849,501, 5,847,099, 5,843,675, 5,852,173 and 5,712,381 [are used](see, also SEQ ID Nos. 18, 19, 20 and 21). Also, the TNF-BPs described in U.S. Patent No. 5,811,261, which describes [TBP-1]TBP-1, a 180 amino acid protein isolated from human urine, U.S. Patent Nos. 5,808,029, 5,776,895 and 5,750,503, which describe chimeric TNF-BPs containing the soluble portion of the P55 TNF receptor and all but the first domain of the constant region of IgG1

or IgG3 heavy chains, and the TNF-BPs described in Colagiovanni et al., Immunopharmacol. Immunotoxicol., 18(3):397-419 (1996) and Olsson et al., Biotherapy., 3(2):159-65 (1991), which describes a 50 [kD]kDa protein isolated from human urine, can be the TNF receptor antagonist.

Please amend the paragraph on page 56, lines 1-23, as follows:

(c) Anti-Flaviviridae Vaccine

An anti-Flaviviridae vaccine, such as an anti-Dengue virus vaccine, can be used (e.g., U.S. Patent No. 5,494,671, Becker, Virus Genes, 9(1):33-45 (1994) (Dengue fever virus and [Japanse] Japanese encephalitis virus synthetic peptides with motifs to fit HLA class I haplotypes), Blok, et al., Virology., 187(2):573-90 (1992) (Dengue-2 virus vaccine), Dharakul, et al., J. Infect. Dis., 170(1):27-33 (1994) (live attenuated Dengue virus type 2 vaccine), Green, et al., J Virol., 67(10):5962-7 (1993) (live attenuated Dengue virus type 1 vaccine), Hoke, et al., Am. J. Trop. Med. Hyg., 43(2):219-26 (1990) (attenuated Dengue 4 (341750 Carib) virus vaccine), Khin, et al., Am. J. Trop. Med. Hyg., <u>51(6)</u>:864-9 (1994), (Dengue-2 PDK53 candidate vaccine), Kinney, et al., Virology., 230(2):300-8 (1997) (attenuated vaccine derivative, strain PDK-53), Leblois, et al., Nucleic Acids Res., 21(7):1668 (1993) (Dengue virus type 2 (strain PR-159) NS1 gene and its vaccine derivative), Marchette, et al., Am. J. Trop. Med. Hyg., 43(2):212-8 (1990) (attenuated Dengue 4 (341750 Carib) virus vaccine), Price, et al., Am. J. Epidemiol., 94(6):598-607 (1971) (injection with Dengue virus), Putnak, et al., Am. J. Trop. Med. Hyg., 55(5):504-10 (1996) (purified, inactivated, Dengue-2 virus vaccine prototype made in fetal rhesus lung cells), Putnak, et al., *J. Infect. Dis.*, <u>174(6)</u>:1176-84 (1996) (purified, inactivated, Dengue-2 virus vaccine prototype in Vero cells), Schlesinger, et al., J Gen Virol., 68(3):853-7 (1987) (Dengue 2 virus non-structural glycoprotein NS1)).

Please amend the paragraph on page 58, lines 18-27, as follows:

An anti-Marburg antibody can be used. The antibodies can be raised against Marburg virus protein sequences with the following Genbank accession numbers[are used]: AAC40455-AAC40460, VHIWMV, RRIWMV, S44052-S44053, S33316, S32582-S32583, A45705, B45705, S44049, S44054, CAA78114-CAA78120, CAA82536-CAA82542, CAA45746-CAA45749, CAA48507-CAA48509 and AAA46562-AAA46563 or encoded by nucleic acid molecules containing nucleotide sequences with the following Genbank accession numbers: AF005730-AF005735, Z12132, Z29337, X64405-X64406, X68493-X68495, M72714, M92834 and M36065.

Please amend the paragraph on page 59, lines 11-14, as follows: (d) Anti-Arenaviridae Antibody

An anti-Arenaviridae antibody, such as an anti-Junin virus [antibody]antibody, can be used (see, e.g., the antibodies described in Mackenzie, et al., Am. J. Trop. Med. Hyg., 14(6):1079-84 (1965)).

Please amend the paragraph on page 81, lines 7-23, as follows:

U.S. Patent No. 4,154,819 describes a process for preparing a γ -globulin solution suitable for the intravenous application by treating the solution of γ -globulin with acetimido ethyl ester hydrochloride, diketene, formimido ethyl ester hydrochloride or [propanesultone]propanesulfone at a pH of about 9, thereafter adjusting the pH to about 7 to 7.5, and separating the solution from the solids by dialysis or fractionation followed by sterile filtration. Generally, the diketene is employed in about 0.02 g per g of protein in the γ -globulin solution.

___U.S. Patent No. 4,374,763 describes a process for producing γ -globulin suitable for use in intravenous administration and of an anticomplementary activity of lower than 20% by bringing Cohn's Fraction II for the gamma-globulin into suspension in an aqueous solution of a monosaccharide, disaccharide or sugar alcohol, adjusting the pH of the suspension to about 7.0 to 9.0, adding dextran of an average molecular weight of 10,000 to 70,000 into the suspension to produce an aqueous about 2 to 10% (w/v) solution of

dextran, and after removing the thus formed precipitate, adding ammonium sulfate to the mother liquor to precipitate the gamma-globulin.

Please amend the paragraph beginning on page 93, line 20, through page 94, line 2, as follows:

c. Methods of treatment using the resulting blood-derived compositions

The compositions thus produced are suitable for treating viral hemorrhagic diseases or disorders or other diseases, disorders or syndromes involving such cytotoxic responses including, but not limited to, other acute infectious diseases, sepsis, cachexia, rheumatoid arthritis and other autoimmune disorders, acute cardiovascular events, chronic myelogenous leukemia and transplanted bone marrow-induced graft-versus-host disease, septic shock, immune complex-induced colitis, cerebrospinal fluid inflammation, autoimmune disorders, multiple sclerosis. Accordingly, methods for treating or preventing a viral hemorrhagic disease or disorder or other such disorders involving such [cytoxic]cytotoxic responses in a mammal are provided. These methods include the steps of administering to the mammal an effective amount of the immune composition(s) produced according to the above processes.

Please amend the paragraph beginning on page 99, line 12, through page 100, line 3, as follows:

Filoviruses are enveloped, nonsegmented negative-stranded RNA viruses. The two species, Marburg and Ebola virus, are serologically, biochemically, and genetically distinct. Classification, virion morphology and structure, genomic organization and diagnosis are described in detail in Beer et al., Naturwissenschaften, 86:8-17 (1999), Springer-Verlag 1999. Marburg and Ebola viruses are pleomorphic particles that vary greatly in length, but the unit length associated with peak infectivity is 790 nm for Marburg virus and 970 nm for Ebola virus (Regnery et al., J. Virol., 36:465-469 (1980)). The virions appear as either long filamentous (and sometimes branched) forms or in shorter U-shaped, 6-shaped (mace-shaped), or circular (ring) configurations (Murphy et

al., Paltyn S.R. (ed) Ebola virus hemorrhagic fever, Elsevier/North-Holland, Amsterdam, pp. 61-82 (1978); Peters et al., Martini and Siegert (eds) Marburg virus disease, Springer, Berlin Heidelberg, New York, pp. 68-83 (1971)). Virions have a uniform diameter of 80 nm and a density of 1.14 g/ml. They are composed of a helical nucleocapsid, a closely apposed envelope derived from the host cell plasma membrane, and a surface projection layer composed of trimers of viral [glycoportein]glycoprotein (GP) (Feldmann *et al.* (1991) *Virology 182*:353-356). All filoviruses contain one molecule of noninfectious, linear, negative-sense, single-stranded RNA with a M_r of 4.2 x 10^6 , constituting 1.1% of the virion mass (Kiley M.P *et al.* (1988) *J. Gen. Virol.* 69:1957-1567 (1988); Regnery *et al.* (1980) *J. Virol.* 36:465-469).

Please amend the paragraph beginning on page 103, line 27, through page 104, line 12, as follows:

The viral genome of approximately 11 kb is infectious, has a messengerlike positive polarity, and can be translated in vitro. The 5' end of the RNA has a type I cap structure but lacks a poly A tail at the 3' end (Rice et al., Science, 229:726-33 (1985); Hahnet al., Virology, 162:167-80 (1988); Irie et al., Gene, 74:197-211 (1989)). It contains a single open reading frame of about 10,000 nucleotides encoding three structural and seven nonstructural proteins. The gene order is 5'-C-prM(M)-E-NSI-NS2A-NS2B-NS3-NS4A-NS4B-NS5. The proteins are synthesized as a polyprotein of about 3000 [aminoacids]amino acids that is processed cotranslationally and posttranslationally by viral and host proteases (Biedrzycka et al., J. Gen. Virol., 1987, 68:1317-26; Mackow et al., J. Gen. Virol., 1987, 69:23-4; Speight et al., Virology, 1987, 159(2):217-28; Chambers et al., Virology, 1989, 169:100-9; Markoff et al., J. Virol., 1989, 63:3345-52; Preugschar et al., J. Virol., 1990, 64:4364-74; Falgout et al., J. Virol., 1991, 65:2467-75; Preugschat et al., J. Virol., 1991, 65:4749-58; Preugschat F., et al., Virology, 1991, 185:689-97; Cahour et al., J. Virol., 1992, 66:1535-42).

Please amend the paragraph on page 107, lines 19-31, as follows:

Arenaviridae virus infection, and particularly Lassa virus, Machupo virus, or Pichinde virus infection, can be diagnosed by any methods known in the art according to clinical, immunological or molecular criteria. Any known immunological methods can be used in the diagnosis of Arenaviridae virus infection, and particularly Lassa virus, Machupo virus, or Pichinde virus infection (see Current Protocols in Immunology (Ed. Coligan et al.) John Wiley & Sons, Inc., 1997). Antibody-based or antigen-based immunological [methods include]methods, including immuniprecipitation, Western blotting, dot blotting and in situ immuno-detection methods such as [immunofluorescence]immunofluorescence, can be used. In a specific embodiment, anti-Arenaviridae virus or anti-Lassa virus, anti-Machupo virus and anti-Pichinde virus antibodies known to those of skill art in the or described herein can be used in the immunodiagnosis.

Please amend the paragraph beginning on page 115, line 27, through page 116, line 5, as follows:

Group 5

The animals from this group were given, intravenously daily from the second day after infection until the sixth day, 0.3 ml of the serum collected from the animals of the group 1 on the first day after those animals were treated with doxycycline. In this volume, the Serum collected from the animals of group 1 [contain]contained 6.6 pg IL-1, 60 pg IL-1ra, 1.5 pg TNF and 25 pg sTNFr. The virus detection was provided by PCR-method on the second day after infection. From the first day after infection, the sera were taken from the mice of group 5 to detect concentration of IL-1, TNF, IL-1RA and sTNFr (Table 11).

Please amend the paragraphs on page 129, lines 14-27, as follows:

Group B2- 30 mice - was used for obtaining blood samples on day (0) and days 1, 3, 5, 6 and 12 post infection. Blood samples were obtained from the orbital sinuses (at every time point 3 mice were used for harvesting blood). All

blood samples (500 μ l each) were frozen at -70° C. After completion of the experiment, the concentrations of TNF- α , and IL-1 β were measured.

Groups C

Group C1 - control for mortality. 10 mice.

Group C2 - 26 mice - was used for obtaining blood samples on day (0) and days 1, 3, 5 and 12 post infection. Blood samples were obtained from the orbital sinuses (at every time point 3 mice were used for harvesting blood). All blood samples (500 μ l) were frozen [and]at -70° C. After completion of the experiment, the concentrations of TNF - α and IL-1 β were measured.

Please amend the paragraph on page 133, lines 4-25, as follows: Experimental Scheme

All animals were divided into groups, each contained 6 animals. The guinea pigs were infected by the 5 LD₅₀ of the Marburg virus. Animals of the group A were used only for the virus control. Animals of the group B after infection were treated by the human serum (SERUM1) with IgG against Marburg (titer IgG in ELISA 1:80), without IgG against Ebola and sTNFrI (950 pg/ml), TNFa (7.8 pg/ml), IL-1RA (136 pg/ml), IL-1β [(3 pg/ml),](3 pg/ml). Animals of the group B were given SERUM1 intracardially from day 3 after virus infection until day 14, every day at the following doses:

```
3 day - 200\mul
```

⁴ day - 200µl

⁵ day - 400μ l

⁶ day - 400µl

⁷ day - 600µl

⁸ day - 600µI

⁹ day - 600µl

¹⁰ day - 800µl

¹¹ day - 800*μ*Ι

¹² day - 800µl

¹³ day - 800µl

¹⁴ day - [800*μ*l]<u>800*μ*l.</u>

Pleas amend the paragraph b ginning on page 133, line 30, through page 134, line 5, as follows:

Animals of the group C were given Serum 2 intracardially from day 3 after virus infecting until day 12, every day, at the following doses:

```
3 day - 200μl

4 day - 200μl

5 day - 400μl

6 day - 400μl

7 day - 600μl

8 day - 600μl

9 day - 600μl

10 day - 800μl

11 day - 800μl

12 day - [800μl]800μl.
```

Please amend the paragraphs on page 134, lines 10-37, as follows:

Animals of group D were given Serum 3 intracardially from 3 day after virus infecting until day 12, every day, at the following doses:

```
3 day - 200μl

4 day - 200μl

5 day - 400μl

6 day - 400μl

7 day - 600μl

8 day - 600μl

9 day - 600μl

10 day - 800μl

11 day - 800μl

12 day - [800μl]800μl.
```

Animals of the group E were treated with human serum without the antibodies against Marburg and Ebola viruses, and the concentrations of TNF α -7.0 pg/ml, sTNFrl-20pg/ml, IL-1 β -3 pg/ml, IL-1RA-20 pg/ml (SERUM 4). Animals of the group E were given Serum 4 intracardially from 3 days after virus, injecting every day, until day 12, at the following doses:

```
3 day - 200µl
4 day - 200µl
5 day - 400µl
6 day - 400µl
7 day - 600µl
8 day - 600µl
```

9 day - 600μ l 10 day - 800μ l 11 day - 800μ l 12 day - $[800\mu]$]

Please amend the paragraph on page 144, lines 5-11, as follows:

2. Plasma (citrated) is collected from these mice at 24 hr postinjection. One 0.2 ml sample of plasma from each mouse is set aside for testing for the presence of IL-1R and TNF α -Rl [andII]and II; the remainder of the plasma from each mouse is pooled. After removing a small sample from this pool for testing for the cytokines of interest, such as IL-1 and TNF α , the remainder of the plasma pool is be stored at -85°C until needed.

IN THE CLAIMS

Please amend claims 1, 6, and 7 as follows:

- 1. A method of treating a disease, condition or disorder, comprising: administering a tetracycline or tetracycline-like compound, whereby the disease, condition or disorder is treated or prevented, and wherein the disease, condition or disorder is selected from the group consisting of multiple sclerosis, rheumatoid arthritis, acute cardiovascular events, cachexia, inflammatory bowel disease, polytrauma and Crohn's disease.
- 6. The method of claim 1, wherein the tetracycline compound is selected from the group consisting of 4-dedimethylaminotetracycline, 4-dedimethylamino-5-oxytetracycline, 4-dedimethylamino-7-chlortetracycline, 4-hydroxy-4-dedimethylaminotetracycline, 5a,6-anhydro-4-hydroxy-4-dedimethylaminotetracycline, 6a-deoxy-5-hydroxy-4-dedimethylaminotetracycline, 6-demethyl-6-deoxy-4-dedimethylaminotetracycline, 4-dedimethylamino-12a-deoxytetracycline, 4-dedimethylaminotetracycline, 12a-deoxy-4-dedimethylaminotetracycline, 6a-deoxy-5-hydroxy-4-dedimethylaminodoxycycline, 12a,4a-anhydro-4-dedimethylaminotetracycline, 7-dimethylamino-6-demethyl-6-deoxy-4-dedimethylaminotetracycline, 6a-benzyl-thiomethylenetetracycline, 2-nitrilo analogs of tetracycline (tetracyclinonitrile),

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mono-N-alkylated amide of tetracycline, 6-fluoro-6-demethyltetracycline, 11a-chlortetracycline, tetracycline pyrazole, 12a-deoxytetracycline, 4-de(dimethyl-amino)tetracycline (CMT-1), tetracyclinonitrile (CMT-2), [6-demethyl-6-deoxy-4-de(dimethylamino)tetracycline] 6-demethyl-6-deoxy-4-de(dimethylamino)tetracycline (CMT-3), 7-chloro-4-de(dimethylamino)tetracycline (CMT-4), tetracycline pyrazole (CMT-5), 4-hydroxy-4-de(dimethylamino)tetracycline (CMT-6), 4-de(dimethylamino)-12a-deoxytetracycline (CMT-7), 6-deoxy-5a-hydroxy-4-de(dimethylamino)tetracycline (CMT-8), 4-de(dimethylamino)-12a-deoxyanhydrotetracycline (CMT-9), 4-de(dimethylamino)minocycline (CMT-10), [5-ozytetracycline]5-oxytetracycline, 7-chlortetracycline, 6-deoxy-5-oxytetracycline, 6-deoxy-6-demethyltetracycline, 7-bromotetracycline, 6-demethyl-7-chlortetracycline, 6-demethyltetracycline, 6-methylenetetracycline, 11a-chloro-6-methylenetetracycline, 6-methylene-5-oxytetracycline and 11a-chloro-6-methylene-5-oxytetracycline.

7. The method of claim 3, wherein the tetracycline compound is selected from the group consisting of 4-dedimethylaminotetracycline, 4dedimethylamino-5-oxytetracycline, 4-dedimethylamino-7-chlortetracycline, 4hydroxy-4-dedimethylaminotetracycline, 5a,6-anhydro-4-hydroxy-4-dedimethylaminotetracycline, 6a-deoxy-5-hydroxy-4-dedimethylaminotetracycline, 6-demethyl-6-deoxy-4-dedimethylaminotetracycline, 4-dedimethylamino-12adeoxytetracycline, 4-dedimethylamino-11-hydroxy-12a-deoxytetracycline, 12adeoxy-4-deoxy-4-dedimethylaminotetracycline, 6a-deoxy-5-hydroxy-4dedimethylaminodoxycycline, 12a,4a-anhydro-4-dedimethylaminotetracycline, 7dimethylamino-6-demethyl-6-deoxy-4-dedimethylaminotetracycline, 6a-benzylthiomethylenetetracycline, 2-nitrilo analogs of tetracycline (tetracyclinonitrile), mono-N-alkylated amide of tetracycline, 6-fluoro-6-demethyltetracycline, 11achlortetracycline, tetracycline pyrazole, 12a-deoxytetracycline, 4-de(dimethylamino)tetracycline (CMT-1), tetracyclinonitrile (CMT-2), [6-demethyl-6-deoxy-4-de(dimethylamino)tetracycline]6-demethyl-6-deoxy-4-de(dimethylamino)tetracycline (CMT-3), 7-chloro-4-de(dimethylamino)tetracycline (CMT-4), tetracycline

pyrazole (CMT-5), 4-hydroxy-4-de(dimethylamino)tetracycline (CMT-6), 4-de(dimethylamino)-12\alpha-deoxytetracycline (CMT-7), 6-deoxy-5\alpha-hydroxy-4-de(dimethylamino)tetracycline (CMT-8), 4-de(dimethylamino)-12\alpha-deoxyanhydrotetracycline (CMT-9), 4-de(dimethylamino)minocycline (CMT-10), [5-ozytetracycline]5-oxytetracycline, 7-chlortetracycline, 6-deoxy-5-oxytetracycline, 6-deoxytetracycline, 6-deoxy-6-demethyltetracycline, 7-bromotetracycline, 6-demethyl-7-chlortetracycline, 6-demethyltetracycline, 6-methylenetetracycline, 11a-chloro-6-methylenetetracycline, 6-methylene-5-oxytetracycline and 11a-chloro-6-methylene-5-oxytetracycline.